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CHANGE OF CORRESPONDENCE ADDRESS *Application*		
Application Number	10/072,159	
Filing Date	February 5, 2002	**RECEIVED**
First Named Inventor	BIHAIN, et al.	
Group Art Unit	1656	SEP 0 9 2002
Examiner Name	n/a	
Attorney Docket Number	29.US4.DIV	TECH CENTER 1600/2900

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number | 23557 | → | Place Customer Number Bar Code Label Here |

OR

☒ Firm *or* Individual Name	**Frank C. Eisenschenk, Ph.D.**				
Address	**SALIWANCHIK, LLOYD & SALIWANCHIK**				
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City	**Gainesville**	State	**FL**	Zip	**32606-6669**
Country	**USA**				
Telephone	**(352) 375-8100**	Fax	**(352) 372-5800**		

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I am the:

☐   Applicant/Inventor.

☐   Assignee of record of the entire interest. (See 37 CFR 3.71.
     Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)..

☒   Attorney or Agent of record.

☐   Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration No. _____.

SIGNATURE of Applicant or Assignee of Record		
Name	John Lucas, Ph.D., J.D.	Reg. No. 43,373
Signature	*[signature]*	
Date	8/22/02	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐   *Total of _____ forms are submitted.